

## University of Groningen

### Dissociative Identity Disorder

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## Propositions

1. Although patients with DID report inter-identity amnesia for episodic self-referential and autobiographical memory, this does not necessarily imply the presence of true amnesia.
2. Although patients with DID report memory retrieval is less likely to be paired with auto-noetic consciousness when encoded in a different identity, these responses do not necessarily indicate qualitative differences in retrieval between identities.
3. In contrast to clinical views, people with DID are not characterised by inter-identity amnesia for episodic, self-referential memory when assessed using indirect measures of memory.
4. Inter-identity amnesia can probably be interpreted as a meta-memory problem, that is, patients may not search for memories encoded in “amnesic” identities as they do not believe they have access to them.
5. Feigning is not a sufficient explanation for the memory impairment presented with DID.
6. In an adult identity, DID patients report the ability to integrate autobiographical memories into their self-concept, which may indicate preserved meaning making of self-defining memories.
7. Although in child identity states, patients report being less able to make meaning of their self-defining memories this does not necessarily imply a lack of ability.
8. Future DID therapy should treat the memory aspects of the disorder as being a meta-memory impairment. This allows for the central consideration of DID being a person’s attempt to separate their identities as a coping strategy to be maintained.
9. Identities are not as ‘distinct’ as experienced by people with DID and often believed by some practitioners working with this population.
10. Ka mua, ka muri - Walk backwards into the future with your eyes fixed on your past
11. Too many cooks ... creates the tastiest broth!